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Establishment Name Walgreens #07926		Telephone Number 812 144 3752		Date of Inspection (mm/dd/yr) 6/11/20		PERMIT # 19-348	
Establishment Address (number and street, city, state, zip code) 5790 Charleston Rd. New Albany, IN 47150		B47 527 4847					
Owner Walgreens Co.		Purpose: 1. Routine		Follow-up no		Release Date 10 days	
Owner's Address P.O. Box 901 Danville, IL 60015		2. Follow-up		Summary of Violations:			
Person in Charge Emily Locther		3. Complaint		C <input checked="" type="checkbox"/> NC <input checked="" type="checkbox"/> R <input checked="" type="checkbox"/>			
Responsible Person's E-mail Str. 07926 @store.walgreens.com		4. Pre-Operational		Menu Type (See back of page)			
Certified Food Manager		5. Temporary		1 <input checked="" type="checkbox"/> 2 <input type="checkbox"/> 3 <input type="checkbox"/> 4 <input type="checkbox"/> 5 <input type="checkbox"/>			
		6. HACCP					
		7. Other (list)					

- CRITICAL ITEMS ARE IDENTIFIED IN THE CHECKLIST AND NARRATIVE COLUMNS MARKED "C"
- VIOLATION(S) REPEATED FROM PREVIOUS INSPECTIONS ARE DENOTED IN THE "SUMMARY OF VIOLATIONS" AND IN THE NARRATIVE BELOW AS "R"

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